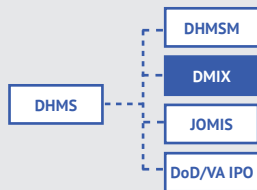


Defense Medical Information Exchange Program Office



Program Executive Office



The mission of the Defense Medical Information Exchange (DMIX) is to provide technical solutions for seamless data sharing and interoperable electronic health records (EHRs) that will evolve with national standards.

PROGRAM HISTORY

2013

- » Improved DoD and VA healthcare data infrastructure and services for clinicians (July)

2014

- » DMIX is established to achieve interoperability and data exchange between DoD, VA, and private sector partners (January)
- » DMIX successfully developed and deployed JLV to present DoD and VA clinicians an integrated, read-only view of healthcare data (September)
- » The 2014 National Defense Authorization Act required both DoD and VA to ensure their systems are interoperable with an integrated display of healthcare data (December)

2015

- » Placed a JLV link into Armed Forces Health Longitudinal Technology Application (AHLTA) and ensured patient context is retained when accessing JLV via AHLTA (March)
- » Partnered with DoD/VA IPO to implement IPO-approved maps that standardize/normalize health data (September)
- » Incorporated private partner data into JLV and expanded JLV user base (December)

CONTACT US

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🐦 @DoD_EHR

📘 Defense Healthcare Management Systems

As of February 19, 2016

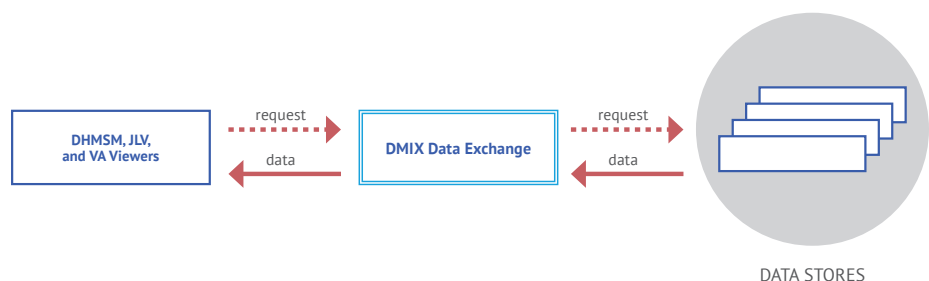
RECENT ACCOMPLISHMENTS

- Improved data sharing with the Department of Veterans Affairs (VA) and with external partners by incorporating additional standardized data domains into Joint Legacy Viewer (JLV)
- Enabled data sharing interface with the Social Security Administration (SSA) to provide complete digital Department of Defense (DoD) patient records to help SSA enhance claims processing
- Improved the technical infrastructure that shares patient data between DoD and VA providers
- Expanded JLV user base to more than 32,000 total users
- Enhanced infrastructure performance with DMIX Release 3 patch in January 2016
- Implemented Data Maps builds 3 through 6

ACQUISITION STRATEGY

Based on direction from the President, Congress, and Secretary of Defense, DoD established two new program offices under Defense Healthcare Management Systems (DHMS) Program Executive Office (PEO): the Defense Healthcare Management System Modernization (DHMSM), to focus on replacement of the existing EHR system, and DMIX to focus on the data-sharing efforts with DoD, VA, and private sector partners. DMIX is enabling healthcare providers to access more health information in a timely manner than ever before, thus improving clinical decision-making for better patient care.

DMIX is consolidating the existing technical tools and service to a streamlined data exchange (below) to support the DoD EHR modernization.



JLV STATISTICS

	DoD	VA
Total JLV Users	36,843	34,005
Total Monthly User Submissions for Jan 2016	69,000+	100,000+

98% System reliability for January 2016

HOW MUCH DATA IS SHARED

1.5M+ Data elements are exchanged daily between DoD and VA

7.4M Unique patients for whom records have been exchanged between DoD and VA

FY16 OBJECTIVES

- Enhance and expand data sharing among all healthcare providers
- On-board National Health Information Exchanges
- Deploy the next release of JLV system
- Support DHMSM Initial Operational Capability (IOC) integration and testing in Pacific Northwest
- Upgrade data terminology service to support objective data sharing architecture and modernized DoD EHR system provided by DHMSM
- Decommission legacy data sharing infrastructure with VA
- DMIX Release in July to include new DoD and VA functional requirements, incorporate Health Artifact and Image Management Solution (HAIMS) document files, and infrastructure improvements for efficiency and capability
- Conduct follow-on operational testing for DMIX Release 3 to ensure operational effectiveness and suitability
- Consolidate the interoperability infrastructure tools into a single “pipe” to retrieve legacy data called DMIX Data Exchange Service
- Achieve the Full Deployment Decision milestone for JLV

JLV USER TESTIMONIALS

“JLV is a tool to improve the value of healthcare we provide to our beneficiaries by preventing extra tests that are done because we don’t have [the information readily] available.”

- CHIEF MEDICAL INFORMATICS OFFICER NAVAL MEDICAL CENTER SAN DIEGO

“I never use AHLTA and prefer to use the JLV URL.”

- CLINICAL CHAMPION

“Easy transition from BHIE (Bidirectional Health Information Exchange).”

- SHAW AIR FORCE BASE

“JLV is much more user friendly and efficient than DoD/VA-Theater.”

- ANONYMOUS USER

